PTO/SB/22 (04-07)
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| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | Docket Number (Optional) | |
|---|---------------------|--------------------------|--------------------------------|
| FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | | LUN-0200 | |
| Application Number 10/025,790-Conf. #586 | | Filed | December 26, 2001 |
| Application Number 10/023,730-00m. #300 | | 1 1100 | |
| For METHOD AND SYSTEM FOR NETWORK BASED SELF-HELP SERVICE | | | |
| Art Unit 2154 | | Examiner | J. Joo |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | | |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | | |
| One month (37 CFR 1.17(a)(1)) | <u>Fee</u> \$120 | Small Entity § \$60 | <u>Fee</u> \$ |
| Two months (37 CFR 1.17(a)(2)) | \$450 | \$225 | \$ |
| | \$1020 | \$510 | \$ 510.00 |
| X Three months (37 CFR 1.17(a)(3)) | | | \$ 310.00 |
| Four months (37 CFR 1.17(a)(4)) | \$1590 | \$795 | |
| Five months (37 CFR 1.17(a)(5)) | \$2160 | \$1080 | \$ |
| X Applicant claims small entity status. See 37 CFR 1.27. | | | |
| A check in the amount of the fee is enclosed. | | | |
| Payment by credit card. Form PTO-2038 is attached. | | | |
| The Director has already been authorized to charge fees in this application to a Deposit Account. | | | |
| X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to | | | |
| Deposit Account Number 18-0013 . I have enclosed a duplicate copy of this sheet. | | | |
| | | | |
| I am the applicant/inventor. | | | |
| assignee of record of the entire interest. See 37 CFR 3.71. | | | |
| Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). | | | |
| X attorney or agent of record. Regi | stration Numbe | 40,949 er 29,21 | |
| attorney or agent under 37 CFR 1 | | | |
| Registration number if acting under | | | <u> </u> |
| | | | |
| _ au / | | | July 23, 2007 |
| Signature | | | Date |
| Lee Cheng | | | 200) 055 0750 |
| Carl Schaukowitch Typed or printed name | | | 202) 955-3750 ephone Number |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | |
| Total of 1 form is submitted. | | | |
| | <u></u> | | |

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